





Alberta International Medical Graduate Program **APPLICANT IDENTITY VERIFICATION FORM**

THIS FORM MUST BE HANDWRITTEN ONLY. PLEASE PRINT CLEARLY.

All AIMG Program applicants:

I.

- must have their identity verified by an Alberta Notary Public/Commissioner for Oaths as an eligibility requirement.
- are required to complete this identity verification in the presence of an Alberta Notary Public or Commissioner for Oaths and attach a photograph, which must be officially certified. Applicants must sign, date, and print their current name on this page, and submit it as part of their application. DO NOT COMPLETE ANY PART OF THIS FORM BEFORE MEETING A NOTARY/COMMISSIONER.

Option A or B for the Residence in Alberta eligibility requirement: Applicants are not required to be physically present in Alberta at the time of notarization. Virtual or in person notarization occurring outside of Alberta is acceptable. Any changes made to amend this form to indicate location or virtual notarization must be completed accurately by a Notary/Commissioner. Option C for Residence in Alberta eligibility requirement: Applicants are required to be physically present in Alberta from December 1, 2024 - May 18, 2025.

THIS SECTION TO BE COMPLETED BY THE APPLICANT ONLY

I,	, the undersigned, born on	hereby
(AIMG Program Applicant)	, the undersigned, born onherebyhereby	
certify on this date(dd/mm/yyyy)	under oath that:	
	ake on, or in connection with, the AIMG Program Application are parts of the Application and in the credentials furnished or to be	
THIS SECTION TO BE COMPLETED BY	A <u>NOTARY/COMMISSIONER FOR OATHS ONLY</u>	
I certify that, on the date shown below, individual by (please check all boxes):	the individual named above did appear personall	y before me and that I did identify the
\Box comparing their physical appearance by the individual and with the photograph	e with the photograph on the valid government-is aph affixed hereto, and	sued identifying document presented
$\hfill\Box$ comparing the individual's signature identifying document, and	made in my presence on this form with the signat	ure on their valid government-issued,
\square I can confirm the affixed photo below	w is recent (within the past 6 months)	
The statements in this document are su	ubscribed and sworn before me by the individual o	n(dd/mm/yyyy)
in my capacity as a Notary Public/Comm	nissioner for Oaths in	, (City or Town) Alberta.
Name of Notary Public/Commissioner	r for Oaths:	
Telephone:		
Email:		
Signature of Notary Public/Commission	oner for Oaths:	Attach one passport size (50mm x 70mm) photograph here.
of the applicant which was taken within six (6)	that the photograph attached hereto is a photograph months of the date of submission of Applicant's AIMG rmation given in the application is true, complete, and	
(Applicant's Signatur	e)	

2026 Cycle